

MEDICAL SUPPORT REQUIREMENTS - Section 227

Duty of support procedures for Medicaid programs are necessary for the establishment and enforcement of medical support orders. As a condition of Medicaid eligibility, each legally responsible applicant and recipient must assign to the agency his/her rights and the rights of any other eligible individual to medical support or other third party payments. They are not required to assign their rights to child support payments. The individual must also comply with ORS in establishing paternity and medical support obligations.

Who must do duty of support forms:

- ✓ An ORS/CSS application must be completed by the parents or legal guardians of all children who receive Medicaid on an absent natural or adoptive parent unless they meet the exemptions below.
- ✓ Pregnant women are not required to comply with duty of support during pregnancy and for 60 days after the end of the pregnancy and to the end of that month.
- ✓ If a minor parent is emancipated due to marriage, age, or court order; the minor parent must complete an ORS/CSS application on the absent parent of his/her own child.

A different referral process has been established for children living in certain living arrangements. Do not complete a ORS/CSS application on the absent parents of:

- ✓ Children placed in foster care
- ✓ Children in Utah State Hospital
- ✓ Children in the State Training School
- ✓ Children in a nursing home or on HCB Waivers
- ✓ Children in a community placement
- ✓ Children placed in the custody of the Division of Youth Corrections

It is not a requirement to complete a ORS/CSS application on an absent parent for the following:

- ✓ Children receiving Refugee Assistance
- ✓ Children living with both parents in the home who are responsible for the support of the children **AND** the child has no other stepparents or biological or adoptive parents
- ✓ Children receiving SSI and/or SSP
- ✓ Children who are not applying for or receiving Medicaid
- ✓ Unborn children

THIRD PARTY LIABILITY REQUIREMENTS

A third party is an individual, institution, corporation, or public/private agency that may be responsible for paying all or part of the medical cost of an applicant or recipient. A third party may include health, accident, or hospital insurance; liability insurance, such as auto and homeowner's policies; industrial accident claims; court judgements; and an absent parent ordered to provide medical support for a child.

Third Party Requirements of Applicants:

Applicants for medical assistance (including QMB, but excluding SLMB & QI's) must, as a condition of eligibility, cooperate by providing information about any possible third party coverage that may be responsible for pay medical expenses, unless they claim good cause. **Good Cause must be explained to all applicants.**

- ✓ DO NOT approve Medicaid for any adult until he or she has provided information to complete the Third Party Liability Questionnaire (Form 19 or ALHI notice).
- ✓ If the parent refuses to provide TPL information, without good cause, the parent will be sanctioned from receiving Medicaid.

Third Party Requirements of Recipients:

- ✓ Adult recipients of medical assistance must report all changes in third party liability (including the addition of a newborn child to a policy), and they must cooperate in the establishment and collection of third party claims. This includes cooperating in the establishment of paternity for born children.
- ✓ Emancipated inor parents and emancipated children must report all changes in third party liability, and they must cooperate in the establishment and collection of third party claims.

DUTY OF SUPPORT / THIRD PARTY LIABILITY REQUIREMENTS

Medical Program	Duty of Support Required	Worker Action	TPL Required	Worker Action
FM-F FM-O Family Medicaid	Yes	<p><u>New Cases</u></p> <ol style="list-style-type: none"> 1. Explain the benefits of establishing paternity and obtaining support from the absent parent, and the option to claim good cause. 2. Give the ORS/CCS application packet to the applicant/recipient to complete and return or refer the person to the ORS/CSS worker according to the local office pathway. 3. Explain good cause for non-cooperation. <p><u>Reopening Cases</u></p> <ol style="list-style-type: none"> 1. When reopening a Medicaid case within 60 days of the closure, use form AREN to notify ORS that the case will be reinstated. It is not necessary to have new application completed. 2. If the case has been closed for more than 60 days, require applicants to complete a new application. <p>Refusal to Cooperate Sanction: If good cause is not claimed or the good cause claim is denied, and the non-complying adult is not pregnant, the non-complying adult is disqualified from receiving Medicaid.</p> <p>Pregnant Women: If the woman is pregnant, a sanction would not be imposed until 60 days after the end of the pregnancy and to the end of that month. At the end of the 60 day postnatal coverage period, remove the non-complying adult from the medical card.</p>	Yes	<ol style="list-style-type: none"> 1. Explain the requirement to provide information about any possible third party coverage that may be responsible to pay medical expenses, and the option to claim good cause. 2. Do Not approve Medicaid for the adult until he/she has provided Third Party Information and signed either a Medicaid Application (61M) or a Third Party and Insurance Information (Form 19 or ALHI). OR If the customer wishes to claim good cause, complete the good cause process. 3. If TPL exists which has not been included as part of a child support referral, the worker must inform ORS. <p>Refusal to Cooperate Sanction:</p> <p>If the adult has not claimed good cause or the good cause has been denied, disqualify the non-complying adult from receiving Medicaid.</p>

Medical Program	Duty of Support Required	Worker Action	TPL Required	Worker Action
NB, NB+. & CM	Yes	<p>If the child is a minor parent, explain the benefits of establishing paternity and obtaining support from the absent parent and the option to claim good cause.</p> <p>Give the ORS/CCS application packet to the applicant/recipient to complete and return or refer the person to the ORS/CSS worker according to the local office pathway.</p> <p>If the child is an emancipated minor parent and refuses to cooperate in establishing Medical support for his/her own child, good cause is not claimed, or a good cause claim is denied, disqualify the non-complying minor parent from receiving Medicaid.</p> <p>Do not sanction a child under 18 unless they are an emancipated minor parent and refuses to cooperate in establishing Medical support for his/her own child, good cause is not claimed, or a good cause claim is denied.</p> <p><u>Reopening Cases</u></p> <p>1. When reopening a Medicaid case within 60 days of the closure, use form AREN to notify ORS that the case will be reinstated. It is not necessary to have new application completed.</p> <p>2. If the case has been closed for more than 60 days, require applicants to complete a new application.</p>	Yes	<p>1. Explain the requirement to provide information about any possible third party coverage that may be responsible to pay medical expenses, and the option to claim good cause.</p> <p>2. Do Not approve Medicaid for the adult until he/she has provided Third Party Information and signed either a Medicaid Application (61M) or a Third Party and Insurance Information (Form 19 or ALHI) OR If the customer wishes to claim good cause, complete the good cause process.</p> <p>3. If TPL exists which has not been included as part of a child support referral, the worker must inform ORS.</p> <p>Refusal to Cooperate Sanction:</p> <p>If the adult has not claimed good cause or the good cause has been denied, disqualify the non-complying adult from receiving Medicaid.</p>

Medical Program	Duty of Support Required	Worker Action	TPL Required	Worker Action
PN, PN+, & PG	No	<p>Before the Baby is Born - Do not ask for DOS for an unborn child; however, you should explain the benefits of establishing paternity but if she refuses, take no action.</p> <p>If the woman consents to cooperation, give her the ORS/CCS application packet to complete and return or refer her to the ORS/CSS worker according to the local office pathway.</p> <p>Refusal to Cooperate A pregnant woman cannot be required to cooperate with ORS/CCS for born or unborn children while she is pregnant or through the end of the month in which the 60 days postpartum period ends.</p> <p>At the end of the 60 day period, if the mother wants continued coverage for herself, she must comply with support requirements for the newborn and any other children who are receiving Medicaid. If she has not claimed good cause or the good cause has been denied, disqualify her from receiving Medicaid.</p>	Yes	<ol style="list-style-type: none"> 1. Explain the requirement to provide information about any possible third party coverage that may be responsible to pay medical expenses, and the option to claim good cause. 2. Do Not approve Medicaid for her until she has provided Third Party Information and signed either a Medicaid Application (61M) or a Third Party and Insurance Information (Form 19 or ALHI). OR If the customer wishes to claim good cause, complete the good cause process. 3. If TPL exists which has not been included as part of a child support referral, the worker must inform ORS. <p>Refusal to Cooperate Sanction:</p> <p>If she has not claimed good cause or the good cause has been denied, disqualify her from receiving Medicaid.</p>

Medical Program	Duty of Support Required	Worker Action	TPL Required	Worker Action
RM Refugee Medicaid	No	None See 227-1 #3B	Yes	<p>1. Explain the requirement to provide information about any possible third party coverage that may be responsible to pay medical expenses, and the option to claim good cause.</p> <p>2. Do Not approve Medicaid for the adult until he/she has provided Third Party Information and signed either a Medicaid Application (61M) or a Third Party and Insurance Information (Form 19 or ALHI). OR If the customer wishes to claim good cause, complete the good cause process.</p> <p>3. If TPL exists which has not been included as part of a child support referral, the worker must inform ORS.</p> <p>Refusal to Cooperate Sanction:</p> <p>If the adult has not claimed good cause or the good cause has been denied, disqualify the non-complying adult from receiving Medicaid.</p>

DOS Requirements for ABD, NH, & QM's: For the following programs, DOS is not required if the recipient is a child, you cannot sanction a child. However, if the program is for a parent or guardian of a child on Medicaid and that adult refuses to complete DOS requirements or claim good cause, they must be sanctioned from receiving Medicaid. An applicant/recipient who is sanctioned from Medicaid for non-cooperation is not eligible for any other type of Medicaid including institutional or Waiver Medicaid, Medicare Cost-Sharing program or for the Primary Care Network

Medical Program	Duty of Support Required	Worker Action	TPL Required	Worker Action
BM Blind Medicaid	*see pg 9	<u>New Cases</u> 1. Explain the benefits of establishing paternity and obtaining support from the absent parent, and the option to claim good cause. 2. Give the ORS/CCS application packet to the applicant/recipient to complete and return or refer the person to the ORS/CSS worker according to the local office pathway. 3. Explain good cause for non-cooperation. <u>Reopening Cases</u> 1. When reopening a Medicaid case within 60 days of the closure, use form AREN to notify ORS that the case will be reinstated. It is not necessary to have new application completed. 2. If the case has been closed for more than 60 days, require applicants to complete a new application.	Yes	1. Explain the requirement to provide information about any possible third party coverage that may be responsible to pay medical expenses, and the option to claim good cause. 2. Do Not approve Medicaid for the adult until he/she has provided Third Party Information and signed either a Medicaid Application (61M) or a Third Party and Insurance Information (Form 19 or ALHI). OR If the customer wishes to claim good cause, complete the good cause process. 3. If TPL exists which has not been included as part of a child support referral, the worker must inform ORS. Refusal to Cooperate Sanction: If the adult has not claimed good cause or the good cause has been denied, disqualify the non-complying adult from receiving Medicaid.

Medical Program	Duty of Support Required	Worker Action	TPL Required	Worker Action
DM Disabled Medicaid	*see page 9	<u>New Cases</u> 1. Explain the benefits of establishing paternity and obtaining support from the absent parent, and the option to claim good cause. 2. Give the ORS/CCS application packet to the applicant/recipient to complete and return or refer the person to the ORS/CSS worker according to the local office pathway. 3. Explain good cause for non-cooperation. <u>Reopening Cases</u> 1. When reopening a Medicaid case within 60 days of the closure, use form AREN to notify ORS that the case will be reinstated. It is not necessary to have new application completed. 2. If the case has been closed for more than 60 days, require applicants to complete a new application.	Yes	1. Explain the requirement to provide information about any possible third party coverage that may be responsible to pay medical expenses, and the option to claim good cause. 2. Do Not approve Medicaid for the adult until he/she has provided Third Party Information and signed either a Medicaid Application (61M) or a Third Party and Insurance Information (Form 19). OR If the customer wishes to claim good cause, complete the good cause process. 3. If TPL exists which has not been included as part of a child support referral, send a TPL Only referral on ORSIS Refusal to Cooperate Sanction: If the adult has not claimed good cause or the good cause has been denied, remove the non-complying adult from the medical card.

Medical Program	Duty of Support Required	Worker Action	TPL Required	Worker Action
NH (Nursing Home) WAIVERS (AW, DD) AM (Aged Medical QMB (Qualified Medicare Beneficiaries	*see page 9	NOT APPLICABLE	Yes	<p>1. Explain the requirement to provide information about any possible third party coverage that may be responsible to pay medical expenses, and the option to claim good cause.</p> <p>2. Do Not approve Medicaid for the adult until he/she has provided Third Party Information and signed either a Medicaid Application (61M) or a Third Party and Insurance Information (Form 19 or ALHI). OR If the customer wishes to claim good cause, complete the good cause process.</p> <p>3. If TPL exists which has not been included as part of a child support referral, the worker must inform ORS.</p> <p>Refusal to Cooperate Sanction:</p> <p>If the adult has not claimed good cause or the good cause has been denied, disqualify the non-complying adult from receiving Medicaid.</p>
SLMB Specified Low-Income Medicare Beneficiaries QI-1 & QI-2 Qualifying Individuals	*see page 9	NOT APPLICABLE Adult applicants/recipients may be sanctioned from receiving Medicaid if they fail to cooperate with Medical Support Enforcement procedures for a child receiving Medicaid and do not claim good cause. An applicant/recipient who is sanctioned from Medicaid for non-cooperation is not eligible for any other type of Medicaid including institutional or Waiver Medicaid, Medicare Cost-Sharing program or for the Primary Care Network	No	NOT APPLICABLE